



LEXSTAT N.J.S.A. 26:2H-18.60

LexisNexis (TM) New Jersey Annotated Statutes

*** THIS SECTION IS CURRENT THROUGH NEW JERSEY 213TH LEGISLATURE ***

*** 2ND ANNUAL SESSION (P.L. 2009 CH. 219 AND J.R. 13) ***

*** ANNOTATIONS CURRENT THROUGH JANUARY 21, 2010 ***

TITLE 26. HEALTH AND VITAL STATISTICS
CHAPTER 2H. HEALTH CARE FACILITIES
ARTICLE I. HEALTH CARE FACILITIES PLANNING ACT

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N.J. Stat. § 26:2H-18.60d (2010)

§ 26:2H-18.60d. Inter-agency agreement with Medicaid Inspector General

a. The Commissioner of Health and Senior Services and the Medicaid Inspector General shall establish an inter-agency agreement under which the staff and resources of the Office of the Medicaid Inspector General are utilized to:

(1) investigate charity care claims, which that office or the Department of Health and Senior Services reasonably suspects may be fraudulent, with the same authority as that granted to the Medicaid Inspector General to investigate complaints related to Medicaid integrity, fraud, and abuse pursuant to P.L.2007, c.58 (*C.30:4D-53 et al.*); and

(2) recover monies from third party payers that were paid as charity care subsidies based upon fraudulent charity care claims.

b. The commissioner and the Medicaid Inspector General shall take such actions as are necessary to ensure that any monies recovered pursuant to subsection a. of this section are deposited in the Health Care Subsidy Fund and used for the purposes of providing charity care subsidies pursuant to P.L.1992, c.160 (*C.26:2H-18.51 et al.*).

HISTORY: L. 2007, c. 217, § 4, eff. Jan. 19, 2008.

NOTES:

Effective Dates:

Section 12 of L. 2007, c. 217 provides: "This act shall take effect on the 30th day after enactment, but the Commissioner of Health and Senior Services may take such anticipatory administrative action in advance thereof as shall be necessary for the implementation of this act." Chapter 217, L. 2007, was approved on Dec. 20, 2007.

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